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ABSTRACT

As part of its 1996 welfare reform bill, the U.S. Congress enacted a \$50 million per year program to fund abstinence education. The welfare reform law addresses the problem of births to single adolescents by enforcing child support payments, giving states financial incentives to reduce nonmarital births, and creating the abstinence education grant. The grant, administered under the Federal Maternal and Child Health program, mandates that programs give teens one unambiguous message: sex outside marriage is wrong and harmful to health. Every program funded by the provision must teach: (1) abstinence as the only certain way to avoid pregnancy and sexually transmitted diseases and as the expected standard for students; (2) monogamous married relationships as the expected standard of human sexual activity; (3) self-sufficiency as essential before engaging in sexual activity; and (4) the ability to reject sexual advances and understand the dangers of alcohol and drugs. States may have flexibility in deciding how to administer the program, though they are obligated to be aggressive in creating programs. Regardless of how states distribute the abstinence education money, the funds can only be spent on activities meeting the definition of abstinence education within the Federal statute. Two appendixes provide: Provisions to Combat Rising Out-of-Wedlock Birth Rates, Welfare Reform Conference Report on H.R. 3734; and Legislative Language and Report Language for Abstinence Education Provision. (SM)

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Implementing the Abstinence Education
Provision of the Welfare Reform Legislation

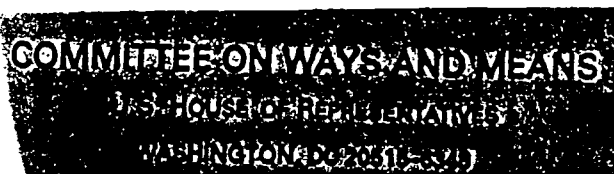
Ron Haskins and Carol Statuto Bevan

Abstract. As part of its 1996 welfare reform bill, Congress enacted a \$50 million per year program to fund abstinence education. This chapter provides an examination of the legislative history of the program; a discussion of the characteristics of the program, especially the definition of abstinence education; and an account of how the program will be implemented by the federal government and the states.

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Introduction

The welfare reform bill signed into law by President Clinton on August 22 contained a provision that received little attention during congressional debate. This provision, found in the miscellaneous title of the legislation (Title IX), provides states with \$50 million per year in entitlement funding beginning October 1, 1997, to conduct abstinence education. The purpose of this paper is to review the legislative background of the abstinence education provision, discuss congressional intent in drafting the provision, and speculate about the initial stages of its implementation.

Legislative Background

Every version of the Republican welfare reform bill contained many provisions designed to reduce illegitimacy (see appendix A for a list of the provisions included in the final legislation). The decision by Congress to launch an explicit attack on illegitimacy makes an interesting story.

During congressional debate, opponents of the welfare reform bill argued that the emphasis on nonmarital births was misplaced because there was no evidence that government policy could have an impact on illegitimacy. On this count the opponents may be right, although the literature on the correlation between welfare benefits and illegitimacy rates contains a number of first-rate studies that link welfare benefits with illegitimacy (Rosenzweig, 1996; Lundberg & Plotnick, 1990; Murray, 1993; Fossett & Kiecolt, 1993). Moreover, since passage of the welfare bill, a study has appeared in the highly regarded journal The Public Interest (Goertzel & Young, 1996) on the impact of the family cap (the policy of providing no additional money for families on welfare that have additional children) in New Jersey. According to the authors of the New

Jersey study, the combination of public debate on the irresponsibility of single mothers already on welfare having babies, led by a prominent black politician, and the initiation of the family cap policy was associated with a 4% reduction in two years in the number of births to mothers on welfare, an 8.5% decline in the state's 10 largest cities, and a 21% decline in Camden, the most welfare-dependent city in the state. During the same period, total births in the state declined just 2 percent. If this study holds up, it would constitute strong evidence that the combination of bully pulpit and policy consequences effect nonmarital birthrates.

Regardless of one's views on the strength of evidence linking welfare with illegitimacy, there is little direct evidence, beyond the New Jersey study just cited, that any particular policy or program reduces the frequency of nonmarital births. Even so, recent history contains many examples of federal policies, including highly controversial and expensive policies, that enjoyed little empirical support at the time of introduction. Congress passed strong civil rights legislation in 1965, for example, despite the lack of evidence that outlawing discrimination based on race would be effective. Similarly, both government policy and public discourse on the evils of smoking were based far more on hope than evidence that the warnings would actually reduce smoking. Nor was there good empirical evidence linking preschool programs with school achievement when Head Start was launched in 1965. Although the federal government has now spent more than \$30 billion on Head Start, we still lack solid empirical evidence that the program produces long-term effects on children's development (Haskins, 1989).

What all these cases have in common is that public policy was based primarily on the judgment that the nation faced a serious social problem and strong action was therefore justified, never mind the lack of solid evidence that the action would produce substantial results.

Similarly, the congressional attack on illegitimacy is based far more on the value position that sex outside marriage is wrong and the consequences severe for mother, child, and society than on empirical evidence linking a particular policy with reduced nonmarital births.

Based on this reasoning, the new welfare reform law contains several different lines of attack on illegitimacy. First, state flexibility encouraged by the block grant structure of the legislation permits states to employ the family cap, to stop paying cash to teen mothers who are not married, and to employ a host of other initiatives tailored to reducing illegitimacy. The policy of stopping cash payments to unmarried teens received majority support in the House of Representatives during the welfare debate but was rejected by a lopsided floor vote in the Senate. Thus, states are not required to end cash payments to unmarried teen mothers, but they are allowed to do so. Several states probably will begin this policy within the next year. The family cap is already policy in approximately half the states; other states are expected to adopt the policy in the future.

The legislation also requires the secretary of Health and Human Services to rank the states according to their nonmarital birth ratios and changes in these ratios over time. The secretary must review and write an annual report on the five highest- and five lowest-ranking states. This provision is intended to draw public attention both to states that are successful in controlling their illegitimacy ratios and to states that are not successful. Hopefully, the secretary's reports will publicize the policies or lack of policies associated with declining and with increasing illegitimacy ratios.

Although intended primarily to raise child support payments, the legislation also increases the pressure on noncustodial parents to pay child support. The entire enterprise of state

enforcement of child support is another approach to reducing nonmarital births. Many observers believe that allowing young men to father children without regard to whether they can support them is an invitation to irresponsible behavior. If child support enforcement becomes so effective that young fathers realize they will wind up paying child support for at least 18 years or face serious consequences, they may be less likely to engage in premarital sexual activity.

The legislation also contains two provisions that give states financial incentives to reduce nonmarital births. Under one provision, states that reduce the proportion of births occurring outside marriage while also reducing their abortion rates receive a cash bonus of either \$20 million or \$25 million, depending on the number of states that meet these two criteria. Under the other provision, states can qualify for performance bonuses totaling \$1 billion over five years if they excel at meeting the goals of the new block grant program. One of the four goals is the reduction of illegitimacy rates.

Finally, the legislation creates the abstinence education grant of \$50 million per year that is the subject matter of this paper. We now explore why Congress included this provision.

The Legislative Provision on Abstinence

The individuals and groups trying to reduce teen premarital sexual activity and births fall roughly into two camps. The first--we will call them the Don'ts--holds that programs must give teens a single, unambiguous message that sex outside marriage is wrong and harmful to their physical and mental health. The second group--we will call them the "Maybes"--also generally agrees that programs should aim to prevent early sex. Even so, this group believes that it is impractical, or even harmful, to "just say no." More specifically, the Maybes want to tell teens

that they should not have sex, but if they do, they should practice "safe sex." Perhaps a majority of Maybes would, in addition to teaching abstinence, teach use of birth control and promote access to condoms and other birth control devices. By contrast, the Don'ts believe that supporting both abstinence and birth control is hypocritical and undermines the forcefulness of a pure abstinence message.

The authors of the abstinence provision in the welfare reform bill were clearly Don'ts. The explicit intent of the legislation is to promote programs that feature the unambiguous message that sex outside marriage is wrong. Moreover, because the Don'ts were concerned that their program might be captured or watered down by the Maybes, they spelled out the specific characteristics of programs that could be funded by the legislation in unusual detail (see appendix B). Every program funded by the provision must:

- have as its "exclusive purpose" teaching the social, psychological, and health gains to be realized by abstaining from sexual activity
- teach that abstinence from sexual activity outside marriage is the expected standard for all school age children
- teach that abstinence from sexual activity is the only certain way to avoid illegitimate births and sexually transmitted diseases
- teach that a mutually faithful monogamous relationship in the context of marriage is the expected standard of human sexual activity
- teach that sexual activity outside the context of marriage is likely to have harmful psychological and physical effects

- teach that bearing children illegitimately is likely to have harmful consequences for the child, the child's parents, and society
- teach young people how to reject sexual advances and how alcohol and drug use increase vulnerability to sexual advances
- teach the importance of attaining self-sufficiency before engaging in sexual activity

The provision was introduced in the Senate on September 8, 1995 by Senator Rick Santorum (R-PA) for Senator Lauch Faircloth (R-NC). Our discussions with a number of people involved in writing the initial legislation indicate that several family groups, led by Robert Rector of the Heritage Foundation, approached Senator Faircloth about the importance of abstinence education. Senator Faircloth was interested in drafting legislation to promote abstinence education and directed his staff to work with the family groups in developing the specific legislative language.

Once the legislation had been passed in the Senate, groups representing Maybes attempted to get Senator Faircloth to drop the language requiring eligible programs to have abstinence education as their "exclusive purpose." At one point during the House-Senate conference in December of 1995, conferees were contemplating dropping the "exclusive purpose" language and thereby allowing programs that combine the abstinence message with advice about birth control, or perhaps actual distribution of birth control devices, to participate in the program. After extensive discussion, and with strong encouragement from Representative Jim Talent (R-MO), Republican conferees decided to retain the original language. The major arguments on behalf of the original language were that previous abstinence programs had been

unacceptable to the medical and especially public health communities and therefore were either poorly funded or included information about birth control, thereby undermining the abstinence message. Moreover, conferees noted that federal law already contains several programs (Title X Family Planning of the Public Health Service Act, Medicaid, and Title XX Adolescent Family Life Demonstrations of the Public Health Service Act) that emphasize the abstinence plus message favored by the Maybes.

Democratic conferees made no formal attempt to change the language of the provision during the House-Senate conference that began in May of 1996. The final language was very similar to the original language and the law as passed is entirely consistent with the position taken by the Don'ts. The only major change in the legislation during the House-Senate conference was that the funding was changed from authorization language to entitlement language. The practical import of this change is that, unless the appropriations committees rescind the entitlement language, the provision will receive automatic funding each year without submission to the appropriation process.

Implementation

Predicting in advance how this provision will be implemented is risky at best. Nevertheless, given the potential importance of abstinence education in reducing the nation's epidemic of nonmarital births and the need for groups hoping to apply for the money to have at least a tentative idea of how the program may be implemented, we have put together a somewhat speculative account of how the program will probably begin.

Largely because the authors of the provision wanted it to be part of an established program to take advantage of existing procedures for distributing money, the program was

written as part of the Maternal and Child Health Services Block Grant (Title V of the Social Security Act). The Maternal and Child Health (MCH) Bureau in the Department of Health and Human Services administers this program. Under the basic MCH program, each state is allocated a specific amount of money by formula within the annual appropriation (the authorization level is \$705 million; the fiscal year 1997 appropriation is \$681 million). To obtain the money, states submit an application to the federal MCH Bureau describing the activities they will pursue to promote maternal and child health. At least 30% of each state's money must be spent on children with special health needs and 30% must be spent on preventive and primary care services for children; not more than 10% of the money can be spent on administration. States must match federal dollars with \$3 in state, local, or private resources for every \$4 provided by the federal government.

Once states receive their share of the funds, they allocate the money to counties that in turn pass most of the money through to local health departments where the funds are actually spent on maternal and child health activities.

The \$50 million for abstinence education is separate from the \$705 million authorized for the MCH block grant. Table 1 presents the annual allocation of the \$50 million among the states and territories. Even though the abstinence education funds are separate from the regular MCH block grant, the program will be administered at the federal level by the same agency that administer the MCH block grant. As we shall see, however, states may have substantial flexibility in deciding how to administer the program.

Table 1

To plan for implementation of the program, officials at the federal MCH Bureau convened a working group on abstinence education early in November, 1996. The working group comprised federal, state, and regional MCH staff, as well as representatives of MCH associations. Based on this collaborative effort, plus consultation with the Commerce Committee (the committee of jurisdiction in the House of Representatives), MCH circulated a draft "administrative guidance" to the states in late February 1997.

This set of guidelines provoked a sharp dispute between MCH and the Commerce Committee in the U.S. House of Representatives. The draft guidelines issued by MCH stated that grant applications would be accepted "only from the State Health Agency." The authors of the legislation, by contrast, had deliberately omitted from the statute the requirement that funds be administered through the MCH bureaucracy, thereby leaving to states all decisions about who can apply for funds and who can decide how the money is distributed. To use the precise language of the Congressional Research Service's legal opinion cited above, these decisions are the province of "state laws, constitutional provisions, and judicial precedents."

The Chairman of the Commerce Committee, along with the Chairman of the Ways and Means Committee who had been directly involved in drafting the statute, felt so strongly about this issue that they sent a joint letter to Health and Human Services Secretary Shalala pointing out that the administrative guidance was inconsistent with the intent of Congress because it directly violated the provision that states control the distribution of abstinence education funds. As this book goes to press, the dispute between Congress and the Administration remains unresolved.

The guidelines will provide states with information on how to apply for the abstinence education money, what qualifies as abstinence education, how much money each state is eligible to receive, what constitutes match money, and how and when states must submit their proposals. After the guidelines are issued, responsibility for devising and submitting a plan for spending the money falls to states. Once MCH approves the state plan, states can begin funding appropriate activities that begin on October 1, 1997.

Based on discussions with Don'ts and Maybes both inside and outside government, it is clear to us that how states handle the abstinence education money will be an important determinant of whether Congressional intent is fulfilled. Many state MCH officials are likely to have bigger issues to worry about than abstinence education. Thus, particularly in states with fairly small abstinence education allocations (21 states receive less than \$500,000 per year; see table 1), MCH officials may use the money for fairly modest activities such as conducting a conference on abstinence education.

Having participated in the Congressional development of the abstinence education provision, however, we believe state governments are obligated by the new law to take aggressive action to create abstinence education programs. Although Congress leaves most of the precise steps of implementation up to the administrative branch of government, at least five actions by states seem appropriate. First, states should make a substantial effort to publicize the availability of the abstinence education funds. Local departments of health, YWCAs and YMCAs, agricultural extension programs, hospitals, universities, public school systems, religious groups, nonprofit community-based groups, independent contractors, and Boy Scout and Girl Scout organizations should all be contacted about the availability of the money.

Second, states should issue clear instructions and timelines about what these organizations must do to qualify for the money. Third, to the extent feasible, states should provide some assistance in proposal development to groups that want to apply for funding. Fourth, state governments must make clear to potential applicants that only proposals that meet the terms of the legislation, especially the definition of abstinence education, will be considered. Fifth, all these activities should be conducted in a manner that provides potential applicants with adequate time to write and submit their proposals. Selections should be made in time to give projects two or three months to prepare for the actual initiation of their abstinence education activities.

Even if state offices make a good faith effort to implement congressional intent, we believe three potential obstacles could interfere with successful implementation. The first impediment is the match requirement of \$3 in state funds for every \$4 in federal funds. As in all cases in which federal legislation requires matching funds, a desirable result of the match is that more resources are available to conduct the program. Either the states themselves or the organizations conducting the programs, however, must figure out a way to obtain the matching funds. Several of our informants were concerned that states or individual projects would have difficulty obtaining funds to meet the match requirement. In this regard, state officials and potential applicants could begin exploring the possibility of obtaining resources with state legislators, state administrators with budget authority, foundations, school systems, and other potential donors. Fortunately, the matching requirement allows the use of in-kind resources such as facilities and volunteer time. The use of in-kind resources will allow state and local projects to meet the matching requirement without having to raise extensive cash.

The second concern is that several of the state officials and others with whom we spoke believe the detailed definition of abstinence education is too restrictive. In their view, few projects will be able to implement faithfully all components of the definition (see the list above and section (b)(2) of the legislation in appendix B). One element of the definition came in for especially strong criticism: namely, the requirement that abstinence programs teach "that a mutually faithful monogamous relationship in context of marriage is the expected standard of human sexual activity." Many professionals appear to believe that convincing adolescents to refrain from sex during the school years will be difficult enough. Convincing them to wait until marriage, which now occurs at age 27 for males and 25 for females on average, seems so far removed from current practices (and perhaps even standards) that abstinence education programs would have a better chance of success if they concentrate on the school years.

Regardless of how one feels about the standard of no sex outside marriage, we believe both the statutory language and, based on our talks with the Members of Congress who wrote this provision and their staffs, the intent of Congress are clear. This standard was intended to align Congress with the social tradition--never mind that some observers now think the tradition outdated--that sex should be confined to married couples. That both the practices and standards in many communities across the country clash with the standard required by the law is precisely the point. As in the cases of civil rights and smoking, the explicit goal of the abstinence education programs is to change both behavior and community standards for the good of the country. It follows that no program that in any way endorses, supports, or encourages sex outside marriage can receive support from the abstinence education money. Officials at the federal MCH Bureau, state officials administering the program, and those conducting local

abstinence education programs have the legal responsibility to ensure that none of the money from this grant supports projects that violate this standard.

Nonetheless, it may be possible to live with this aspect of the definition without great difficulty. Projects funded by the new abstinence education money certainly do not need to place equal emphasis on every component of the definition. In our view, projects that do not violate any aspect of the definition and that emphasize abstinence as the expected standard for children and teenagers (which is an actual requirement stated in subparagraph (B) of the definition in the legislation) are eligible for funding. As long as the specific curriculum and teaching of the project do not violate the abstinent until marriage standard, the project should qualify for funds.

Consider an example. Assume that a given public school system now conducts a one-year sex education class for 10th graders. During the course of the year, the class curriculum calls for presentation of information about birth control, including instruction in the use of various birth control devices. Now assume that the school officials decide that they would like to revise the course to include a six-week unit that exactly follows the definition of abstinence education outlined in the new statute. Can state officials use their abstinence education dollars to fund this unit of instruction even though other parts of the course teach birth control?

We believe it would be illegal to fund this project under the abstinence education statute. The language clearly states that abstinence education is a program with the "exclusive purpose" of teaching the various principles outlined earlier. If this unit is part of a course that teaches use of birth control, then it violates the "exclusive purpose" criterion.

This example, of course, is less than definitive. The "exclusive purpose" criterion is clear enough, but a lack of clarity is introduced by the various possible meanings of the term program.

The school example illustrates that a set of abstinence activities within the broader context of a single program that includes teachings that violate the abstinence definition is not acceptable. But how far away from activities that cannot be supported by the grant must a program be to qualify legally for funding?

Realizing that a definitive clarification will be nearly impossible to achieve, we nonetheless assume that the MCH guidelines will deal with this question as clearly as possible. To err on the side of caution, however, programs that qualify as abstinence education should be conducted by different people at a time different and with materials separate from programs that violate any tenet of the statutory definition of abstinence education. In addition to meeting these conditions, state officials must ensure that the people who plan and conduct the program are making a sincere attempt to create activities consistent with the statutory definition of abstinence education. Thus, program operators must make serious efforts to convince students that sexual activity can cause a host of diseases, that only abstinence is certain to prevent pregnancy, that abstinence is the correct standard for school age children, that nonmarital births to teens have harmful consequences for both mother and child, and so forth.

The third obstacle to successful implementation is the split between the Don'ts and the Maybes. From the perspective of the Don'ts, the federal programs that currently provide funds for sex education, birth control, and even abstinence education are dominated by the Maybes. As a result, the Don'ts hold that real abstinence education, by which they mean abstinence education that does not dilute the abstinence message by including instruction on birth control, has rarely been supported by federal dollars. Congressional intent in funding this new program was not to disrupt any ongoing programs, including those that feature birth control instruction or

distribution. Rather, Congress wanted to ensure that some federal dollars were used exclusively to support true abstinence education programs.

Our discussions with advocacy groups supporting abstinence education, especially at the state and local level, have revealed a widespread belief among the Don'ts that the MCH system in many states is dominated by Maybes. As the head of a small abstinence organization in a Western state told us during a recent phone conversation, as long as the state MCH bureaucracy has control of the abstinence money, small, community-based organizations that promote abstinence will not be competing on a level playing field. This program director and many others like him believe that state MCH programs will either keep the money within the MCH system, particularly within the local public health departments, or award competitive grants to organizations dominated by Maybes.

We have no way of knowing the extent to which this claim is correct. A comment about the intent of Congress in establishing the abstinence education grant program, however, seems pertinent to this concern. Congress specified that the funds are to go to "a state"; however, Congress did not specify the exact roles of the executive or the legislative branches of state government, nor did Congress specify a particular branch or unit within state government--not even the MCH branch that normally controls Title V funds--that must control the abstinence funds. Rather, the statute leaves these decisions primarily up to states. By contrast, in the case of both the Temporary Assistance for Needy Families Block Grant and the Child Care and Development Block Grant, Congress was very careful to spell out (in section 901) that federal dollars were subject to appropriation by the state legislature.

After consulting lawyers in the Congressional Research Service, we believe these facts about the federal abstinence education statute indicate that state laws, constitutional provisions, and judicial precedents will determine which branch of state government and which agencies within branches control decisions regarding the abstinence education funds. If state legislatures want to assert their authority by demanding a voice in how the abstinence education money is used, in most states they will be able to exert substantial influence.

Given the relatively small amount of money received by most states and the tradition that governors have major control over block grant funds, however, it seems unlikely that most state legislatures will pay much attention to this money. Rather, in most states, it seems safe to predict that the executive branch will make the major decisions about how the funds are to be allocated.

Similarly, unless governors or other senior state officials are subject to organized lobbying efforts, the abstinence education funds will likely come to the state MCH organization as part of the MCH Block Grant, the state MCH agency will in turn probably pass the money along to county public health departments, and that the county public health departments will decide how the money is to be spent. There is, however, nothing inevitable about this process for distributing abstinence education money. Certainly there is nothing in the federal statute that requires states to distribute the money in this way.

Consider an example. Assume that in some state an organization of churches and faith-based groups is already involved in activities that emphasize the importance of abstinence among youth. Suppose further that the leaders of this organization have enough political clout to get the attention of the governor or senior officials in the governor's administration. If the

leaders use their influence to argue that the abstinence education money would have more impact if the governor appointed an advisory board to emphasize the availability of the funds, to solicit applications aggressively, and then to advise the administration about which organizations should receive the money, the normal decision-making procedures of the state MCH bureaucracy could probably be changed. The point is that in most cases governors will have effective control over the abstinence education money and therefore can, within the boundaries established by custom, reason, and state law, distribute the funds in whatever fashion they determine will produce the best results.

Regardless of how states choose to distribute the abstinence education money, it is appropriate to conclude this somewhat speculative account with a certainty: the funds can only be spent on activities that meet the detailed definition of abstinence education laid out so carefully in the federal statute.

Appendix A:
Provisions to Combat Rising Out-of-Wedlock Birth Rates,
Welfare Reform Conference Report on H.R. 3734

Cash welfare block grant

- Creates a \$100 billion cash welfare block grant for states to use to "prevent and reduce the incidence of out-of-wedlock pregnancies," among other purposes.
- Requires state plans to establish goals and take action to prevent and reduce the incidence of out-of-wedlock pregnancies, with special emphasis on teenage pregnancies, and establish numerical goals for reducing the illegitimacy ratio of the state for calendar years 1996 through 2005.

Added grants for reducing out-of-wedlock births

- Provides added grants of up to \$25 million annually for states that are most successful in reducing the number of out-of-wedlock births while reducing the rate of abortions.
- States that are successful in reducing illegitimacy and strengthening families are eligible for a share of a new \$1 billion "performance bonus" fund.

Family cap

- Allows any state to establish a family cap policy ending the practice of increasing federal cash welfare benefits when mothers on welfare have babies (the former provision setting a national family cap from which states could "opt-out" was deleted by the Byrd rule).

Combating teen pregnancy

- Allows state flexibility on limiting cash welfare for unmarried teens.
- Requires teens to be in school and living at home or with an adult to receive assistance.
- Allows states to use block grant funds to provide, or assist in locating, adult-supervised living arrangements, such as second-chance homes, for teen mothers.

Added funds for abstinence education

- Provides \$50 million in directly appropriated funding for each of fiscal years 1998 through 2002 for abstinence education.

Encouraging paternity establishment

- Requires states to reduce cash welfare payments by at least 25 percent for families that include a parent who fails to cooperate in establishing paternity or obtaining child support.

National goals to prevent teen pregnancy

- Requires the secretary of HHS within 1 year to implement a strategy for preventing teen pregnancies, ensuring that 25% of communities have prevention programs.

Annual ranking of states and review regarding out-of-wedlock births

- Requires the secretary of Health and Human Services to rank annually all states according to out-of-wedlock birth ratios and changes in ratios over time and to review the five highest and five lowest ranking states.

Congressional findings

- Includes a section of findings on the crisis that out-of-wedlock births pose for children, families, and the nation; states that an effective strategy to combat teen pregnancy must address the issue of male responsibility, including statutory rape culpability, and prevention.

Table 1
Annual State-by-State Allotments for Abstinence Education Programs,
1998-2002
(dollars)

State	Amount	State	Amount
Alabama	1,081,058	New Jersey	843,071
Alaska	78,526	New Mexico	518,368
Arizona	894,137	New York	3,377,584
Arkansas	660,004	North Carolina	1,151,876
California	5,764,199	North Dakota	126,220
Colorado	544,383	Ohio	2,091,299
Connecticut	330,484	Oklahoma	756,837
Delaware	80,935	Oregon	460,076
District of Columbia	120,439	Pennsylvania	1,820,070
Florida	2,207,883	Rhode Island	129,692
Georgia	1,450,083	South Carolina	811,757
Hawaii	131,519	South Dakota	169,578
Idaho	205,228	Tennessee	1,067,569
Illinois	2,095,116	Texas	4,922,091
Indiana	857,042	Utah	325,666
Iowa	424,908	Vermont	69,855
Kansas	391,185	Virginia	828,619
Kentucky	990,488	Washington	739,012
Louisiana	1,627,850	West Virginia	487,536
Maine	172,468	Wisconsin	795,859
Maryland	535,712	Wyoming	80,935
Massachusetts	739,012	American Samoa	44,992
Michigan	1,899,560	Guam	69,495
Minnesota	613,756	Northern Marianas	42,493
Mississippi	1,062,752	Puerto Rico	1,449,018
Missouri	969,291	<u>Trust Territories:</u>	
Montana	186,439	Palau	13,501
Nebraska	246,177	Micronesia	47,492
Nevada	157,534	Marshall Islands	21,000
New Hampshire	82,862	Virgin Islands	136,509
TOTAL			50,000,000

Source: Department of Health and Human Services.

Legislative Language and Report Language for Abstinence Education Provision

A. Legislative Language

SEC. 912. ABSTINENCE EDUCATION.

Title V of the Social Act (42 U.S.C. 701 et seq.) is amended by adding at the end of the following section:

"SEPARATE PROGRAM FOR ABSTINENCE EDUCATION

"SEC. 510. (a) For the purpose described in subsection (b), the Secretary shall, for fiscal year 1998 and each subsequent fiscal year, allot to each State which has transmitted an application for the fiscal year under section 505(a) an amount equal to the product of—

"(1) the amount appropriated in subsection (d) for the fiscal year; and

"(2) the percentage determined for the State under section 502(c)(1)(B)(ii).

"(b)(1) The purpose of an allotment under subsection (a) to a State is to enable the State to provide abstinence education, and at the option of the State, where appropriate, mentoring, counseling, and adult supervision to promote abstinence from sexual activity, with a focus on those groups which are most likely to bear children out-of-wedlock.

"(2) For purposes of this section, the term 'abstinence education' means an educational or motivational program which —

"(A) has as its exclusive purpose, teaching the social, psychological, and health gains to be realized by abstaining from sexual activity;

"(B) teaches that abstinence from sexual activity outside marriage as the expected standard for all school age children;

"(C) teaches that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems;

"(D) teaches that a mutually faithful monogamous relationship in context of marriage is the expected standard of human sexual activity;

"(E) teaches that sexual activity outside of the context of marriage is likely to have harmful psychological and physical effects;

"(F) teaches that bearing children out-of-wedlock is likely to have harmful consequences for the child, the child's parents, and society;

"(G) teaches young people how to reject sexual advances and how alcohol and drug use increases vulnerability to sexual advances; and

"(H) teaches the importance of attaining self-sufficiency before engaging in sexual activity.

"(c)(1) Sections 503, 507, and 508 apply to allotments under subsection (a) to the same extent and in the same manner as such sections apply to allotments under section 502(c).

"(2) Sections 505 and 506 apply to allotments under subsection (a) to the extent determined by the Secretary to be appropriate.

"(d) For the purpose of allotments under subsection (a), there is appropriated, out of any money in the Treasury not otherwise appropriated, an additional \$50,000,000 for each of the fiscal years 1998 through 2002. The appropriation under the preceding sentence for a fiscal year is made on October 1 of the fiscal year."

B. Report Language

13. ABSTINENCE EDUCATION

Present Law

The Maternal and Child Health (MCH) block grants (title V of the SSA, 42 USC 701) provides grants to States and insular areas to fund a broad range of preventive health and primary care activities to improve the health status of mothers and children, with a special emphasis on those with low income or with limited availability of health services. Sec. 502 includes a set-aside program for projects of national or regional significance. (The FY1995 appropriation for MCH was \$684 million.) See also: Title XX of the Public Health Service Act establishes the Adolescent Family Life (AFL) program to encourage adolescents to delay sexual activity and to provide services to alleviate the problems surrounding adolescent parenthood. One-third of all funding for AFL program services go to projects that provide "prevention services." The purpose of the prevention component is to find effective means within the context of the family of reaching adolescents, both male and female, before they become sexually active to maximize the guidance and support of parents and other family members in promoting abstinence from adolescent premarital sexual relations. (The FY1995 appropriation for AFL was \$6.7 million.)

House bill

Increases the authorization level to \$761 million for FY 96 and each subsequent fiscal year. Adds abstinence education to the services to be provided. Defines abstinence education as an educational or motivational program which:

- (A) teaches the gains to be realized by abstaining from sexual activity;
- (B) teaches abstinence from sexual activity outside of marriage as the expected standard for all school age children;
- (C) teaches that abstinence is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other health problems;
- (D) teaches that a monogamous relationship in context of marriage is expected standard of human sexual activity;
- (E) teaches that sexual activity outside of marriage is likely to have harmful effects;
- (F) teaches that bearing children out-of-wedlock is likely to have harmful consequences;
- (G) teaches young people how to avoid sexual advances and how alcohol and drug use increases vulnerability to sexual advances; and
- (H) teaches the importance of attaining self-sufficiency before engaging in sexual activity.

Senate amendment

Amends the Maternal and Child Health (MCH) block grants (title V of the SSA) to set aside \$75 million to provide abstinence education — defined as an educational or motivational program that has abstaining from sexual activity as its exclusive purpose — and to provide at the option of the State mentoring, counseling and adult supervision to promote abstinence with a focus on those groups most likely to bear children out-of-wedlock. Also increases the authorization level of MCH to \$761 million. (This provision was deleted due to the Byrd Rule.)

Conference agreement

The conference agreement follows the House bill with modification that \$50 million for each of fiscal years 1998-2002 is directly appropriated for this purpose.

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